



GOVERNMENT OF THE DISTRICT OF COLUMBIA
OFFICE OF CAMPAIGN FINANCE
WASHINGTON, D.C. 20003

REPORT OF RECEIPTS AND EXPENDITURES
FOR CANDIDATES, PRINCIPAL CAMPAIGN OR POLITICAL COMMITTEES,
POLITICAL ACTION COMMITTEES, INDEPENDENT EXPENDITURE COMMITTEES

SUMMARY PAGE

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Allen for DC	2. OCF Identification Number PCCCCL187057
Address 1884 Columbia Road NW, #317	3. Is this report an Amendment? (Yes or No) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
City, State and Zip Code Washington, DC 20009	

4. TYPE OF REPORT: **August 10th Report**

This REPORT contains activity for: **General Election**

SUMMARY	COLUMN A THIS PERIOD	COLUMN B CUMULATIVE TO-DATE
5. Covering Period 6/11/2018 through 8/10/2018		
6. (a) Cash on Hand (January 31 Year End Report Only)		\$ 0.00
(b) Cash on Hand at Beginning of Reporting Period	\$ 30,292.00	
(c) Total Receipts [from Line (16)]	\$ 50,875.00	\$ 87,992.00
(d) Subtotal [add Lines 6(b) and 6(c) for Column A]	\$ 81,167.00	
7. Total Expenditures (from Line 22)	\$ 33,106.68	\$ 33,206.68
8. Cash on Hand at Close of Reporting Period [subtract Line 7 from Line 6(d)]	\$ 48,060.32	
9. Debts and Obligations Owed BY the Committee or the Candidate (itemize all on Schedule D)	\$ 0.00	\$ 0.00
10. (a) Loans Owed By the Committee to the Candidate (itemize all on Schedule E)	\$ 0.00	\$ 0.00
(b) Loans from other sources made to the Committee (itemize all on Schedule E-1)	\$ 0.00	\$ 0.00

CERTIFICATIONS/OATHS AND AFFIRMATIONS OF FILERS OF REPORTS OF RECEIPTS AND EXPENDITURES

(1) OATH OR AFFIRMATION OF CANDIDATE IF FILING

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY, THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT I USED ALL REASONABLE DUE DILIGENCE TO ENSURE THAT I AND THE POLITICAL COMMITTEES AFFILIATED/AUTHORIZED BY MY CAMPAIGN ARE IN COMPLIANCE WITH THE REPORTING REQUIREMENTS OF THE DISTRICT OF COLUMBIA CAMPAIGN FINANCE ACT OF 2011, AND HAVE ADVISED ALL CONTRIBUTORS OF THE OBLIGATIONS IMPOSED ON CONTRIBUTORS BY THE CAMPAIGN FINANCE ACT.

TYPE OR PRINT FULL NAME OF CANDIDATE

SIGNATURE OF CANDIDATE

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(2) OATH OR AFFIRMATION OF COMMITTEE TREASURER

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE, CORRECT AND COMPLETE.

Ms. Kimberly G. Alfonso

TYPE OR PRINT FULL NAME OF TREASURER

ELECTRONICALLY CERTIFIED

08/10/2018

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(3) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF INDEPENDENT EXPENDITURE COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE COMMITTEE HAS MADE NO CONTRIBUTIONS OR TRANSFER OF FUNDS TO ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL ACTION COMMITTEE.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

(4) OATH OR AFFIRMATION OF COMMITTEE TREASURER OF POLITICAL ACTION COMMITTEE

I HEREBY SWEAR OR AFFIRM, SUBJECT TO PENALTIES OF PERJURY THAT I HAVE USED ALL REASONABLE DUE DILIGENCE TO PREPARE THIS REPORT, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, THE REPORT IS TRUE AND COMPLETE; AND I FURTHER SWEAR OR AFFIRM THAT THE CONTRIBUTIONS RECEIVED BY THE COMMITTEE AND THE EXPENDITURES MADE HAVE NOT BEEN CONTROLLED OR DIRECTED BY ANY PUBLIC OFFICIAL OR CANDIDATE, ANY POLITICAL COMMITTEE, OR ANY POLITICAL PARTY.

TYPE OR PRINT FULL NAME OF TREASURER

SIGNATURE OF TREASURER

DATE

SUBSCRIBED AND SWORN TO BEFORE ME THIS THE _____ DAY _____ OF _____, 20

NOTARY PUBLIC

NOTE: SUBMISSION OF LATE, FALSE, ERRONEOUS, OR INCOMPLETE INFORMATION MAY SUBJECT THE PERSON TO THE PENALTIES OF D.C. OFFICIAL CODE § 1-1163.35.

**DETAILED SUMMARY PAGE
OF RECEIPTS AND EXPENDITURES
OCF Form 16, Page 2**

1. Full Name of Committee (Name of Candidate, if Candidate is reporting) Allen for DC	REPORT COVERING THE PERIOD FROM: 6/11/2018 TO: 8/10/2018	
I. RECEIPTS	COLUMN A TOTAL THIS PERIOD	COLUMN B CUMULATIVE T0-DATE CUMULATIVE YEAR-TO-DATE
11. CONTRIBUTIONS (OTHER THAN LOANS) FROM:		
(a) Individuals/Organizations Other Than Political Committees (Schedule A)	\$ 50,875.00	\$ 87,992.00 11(a)
(b) Political Party Committees (Schedule A-1)	\$ 0.00	\$ 0.00 11(b)
(c) Political Committees Other than Pol. Comms. Authorized by the same Candidate (Schedule A-2)	\$ 0.00	\$ 0.00 11(c)
(d) The Candidate (Schedule A-3)	\$ 0.00	\$ 0.00 11(d)
(e) Transfers From Authorized Committees of the Candidate identified in this Report (Schedule A-4)	\$ 0.00	\$ 0.00 11(e)
(f) Itemized Monetary Contributions received in excess of \$10,000 from source not associated with the candidate or committee (Schedule A-7)	\$ 0.00	\$ 0.00 11(f)
(g) Total Contributions (Other than Loans) [add lines 11(a), (b), (c), (d), (e) and (f)]	\$ 50,875.00	\$ 87,992.00 11(g)
12. SALES AND COLLECTIONS (Schedule C)	\$ 0.00	\$ 0.00 12
13. LOANS		
(a) Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 13(a)
(b) Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 13(b)
(c) Total Loans [add Lines 13(a) and (b)]	\$ 0.00	\$ 0.00 13(c)
14. OTHER RECEIPTS (Dividends, Interest, etc.) (Schedule A-5)	\$ 0.00	\$ 0.00 14
15. OFFSETS TO OPERATING EXPENDITURES (Schedule A-6)	\$ 0.00	\$ 0.00 15
16. TOTAL RECEIPTS [add Lines 11(g), 12, 13(c), 14 and 15]	\$ 50,875.00	\$ 87,992.00 16
II. EXPENDITURES		
17. OPERATING EXPENDITURES (Schedule B)	\$ 33,106.68	\$ 33,106.68 17
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES (Schedule B-1)	\$ 0.00	\$ 0.00 18
19. LOAN REPAYMENTS:		
(a) Of Loans owed By the Committee to the Candidate (Schedule E)	\$ 0.00	\$ 0.00 19(a)
(b) Of Loans from other source made to the Committee (Schedule E-1)	\$ 0.00	\$ 0.00 19(b)
(c) Total Loan Repayments [add Lines 19(a) and 19(b)]	\$ 0.00	\$ 0.00 19(c)
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Organizations Other Than Political Committees (Schedule B-2)	\$ 0.00	\$ 100.00 20(a)
(b) Political Party Committees (Schedule B-3)	\$ 0.00	\$ 0.00 20(b)
(c) Other Political Committees and PACs (Schedule B-4)	\$ 0.00	\$ 0.00 20(c)
(d) Total Contribution Refunds [add Lines 20(a), (b), and (c)]	\$ 0.00	\$ 100.00 20(d)
21. OTHER EXPENDITURES		
(a) Independent Expenditures (Schedule B-5)	\$ 0.00	\$ 0.00 21(a)
(b) Offsets to Receipts (Schedule B-6)	\$ 0.00	\$ 0.00 21(b)
(c) Total Other Expenditures [add Lines 21(a), and 21(b)]	\$ 0.00	\$ 0.00 21(c)
22. TOTAL EXPENDITURES [add Lines 17, 18, 19(c), 20(d), and 21(c)]	\$ 33,106.68	\$ 33,206.68 22
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD	\$	30,292.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)	\$	50,875.00
25. SUBTOTAL (add Lines 23 and 24)	\$	81,167.00
26. TOTAL EXPENDITURES THIS PERIOD (from Line 22)	\$	33,106.68
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	\$	48,060.32

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

1. Full Name, Mailing Address and Zip Code Miriam Moore 3060 Blaine St, Miami, FL 33133	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Designer Name and Address of Employer Miriam Moore Design Studio 3060 Blaine St, Miami, FL 33133		
Aggregate Year-To-date		\$ 1,000.00	
2. Full Name, Mailing Address and Zip Code David Rivers 220 3rd Ave Unit 2B, Charleston, SC 29403	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer MUSC 171 Ashley Avenue, Charleston, SC 29425		
Aggregate Year-To-date		\$ 50.00	
3. Full Name, Mailing Address and Zip Code Lloyd Moore 3060 Blaine St, Miami, FL 33133	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Businessman Name and Address of Employer The Moore Group of Companies Inc. 3060 Blaine St, Miami, FL 33133		
Aggregate Year-To-date		\$ 1,000.00	
4. Full Name, Mailing Address and Zip Code Pedro Alfonso 1809 Parkside Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer Dynamic Concepts Inc 1730 17th St NE, Washington, DC 20002		
Aggregate Year-To-date		\$ 1,000.00	
5. Full Name, Mailing Address and Zip Code Joseph Askew 6102 New Hampshire Ave NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/11/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Government Relations Name and Address of Employer Verizon 6102 New Hampshire Ave NE, Washington, DC 20011		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 200.00
6. Full Name, Mailing Address and Zip Code Ernest Jarvis 1701 K St NW, Washington, DC 20006		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Comm Real Estate Name and Address of Employer Jarvis Comm Real Estate 1701 K St NW, Washington, DC 20006		
		Aggregate Year-To-date		
7. Full Name, Mailing Address and Zip Code Gregory McCarthy 1334 Riggs St NW, Washington, DC 20009		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation executive Name and Address of Employer Washington Nationals 1500 S Capitol St SE, Washington, DC 20003		
		Aggregate Year-To-date		
8. Full Name, Mailing Address and Zip Code Deryl McKissack 901 K St NW, Washington, DC 20001		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation President &. CEO Name and Address of Employer Mckissack & Mckissack 901 K St NW, Washington, DC 20001		
		Aggregate Year-To-date		
9. Full Name, Mailing Address and Zip Code A Scott Bolden 5320 28th St NW, Washington, DC 20015		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Reed Smith 1301 K St NW Ste 1000, Washington, DC 20005		
		Aggregate Year-To-date		
10. Full Name, Mailing Address and Zip Code Elduise Johnson-Traore 9728 Connecticut Ave, Kensington, MD 20895		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Self 4812 Georgia Ave NW, Washington, DC 20011		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 25.00
11. Full Name, Mailing Address and Zip Code Roger Clark 1415 Montague St NW, Washington, DC 20011		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Squire Patton Boggs 2550 M Street NW, Washington, DC 20037		
		Aggregate Year-To-date		
12. Full Name, Mailing Address and Zip Code Genet Metsha 2314 Minnesota Ave SE, Washington, DC 20020		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Not Employed Name and Address of Employer Self 2314 Minnesota Avenue Southeast, Washington, DC 20020		
		Aggregate Year-To-date		
13. Full Name, Mailing Address and Zip Code McKenzie Bolden 5320 28th St NW, Washington, DC 20015		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual		Occupation attorney Name and Address of Employer reed smith 1301 k st nw, Washington, DC 20005		
		Aggregate Year-To-date		
14. Full Name, Mailing Address and Zip Code George Ty Simpson 1229 Pennsylvania Ave SE, Washington, DC 20003		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/11/2018 Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual		Occupation President Name and Address of Employer Spectrum 1229 Pennsylvania Ave SE, Washington, DC 20003		
		Aggregate Year-To-date		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

15. Full Name, Mailing Address and Zip Code William Alsup 3019 44th St NW, Washington, DC 20016	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Senior Managing Director Name and Address of Employer Hines 800 10th St NW Ste 600, Washington, DC 20001		
Aggregate Year-To-date		\$ 1,000.00	
16. Full Name, Mailing Address and Zip Code Joyce Batipps 1645 Jonquil St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/12/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 1645 Jonquil St NW, Washington, DC 20012		
Aggregate Year-To-date		\$ 250.00	
17. Full Name, Mailing Address and Zip Code Derrick Bailey 11109 Pompey Dr, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/13/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Engineer Name and Address of Employer EZRA Technologies 4415 Nicole Dr Ste B, Lanham, MD 20706		
Aggregate Year-To-date		\$ 1,000.00	
18. Full Name, Mailing Address and Zip Code Sage Hoare 2029 Connecticut Ave NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/15/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer None 2029 Connecticut Ave NW, Washington, DC 20008		
Aggregate Year-To-date		\$ 250.00	
19. Full Name, Mailing Address and Zip Code Katherine Bradley 2211 30th St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/15/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation President Name and Address of Employer CityBridge Education 600 New Hampshire Ave NW F1 9, Washington, DC 20037		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

	Aggregate Year-To-date		\$ 1,000.00
20. Full Name, Mailing Address and Zip Code Lyals Battle 9330 Hickory Limb, Columbia, MD 21045	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/18/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Program Manager Name and Address of Employer NCRC 740 15th St NW, Washington, DC 20005		
	Aggregate Year-To-date		\$ 50.00
21. Full Name, Mailing Address and Zip Code Robert Hagans 2003 Shadowrock Ln, Bowie, MD 20721	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/20/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired 2003 Shadowrock Ln, Bowie, MD 20721		
	Aggregate Year-To-date		\$ 1,000.00
22. Full Name, Mailing Address and Zip Code Pamela King Smith 108 Egypt Farms Rd, Owings Mills, MD 21117	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/21/2018	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation CPA Name and Address of Employer King King & Associates 124 Slade Ave Ste 100, Baltimore, MD 21208		
	Aggregate Year-To-date		\$ 150.00
23. Full Name, Mailing Address and Zip Code Suzanne Peck 7512 Royal Oak Dr, McLean, VA 22102	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/22/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Chief Information Officer Name and Address of Employer DC Bar 901 4th St NW, Washington, DC 20001		
	Aggregate Year-To-date		\$ 1,000.00
24. Full Name, Mailing Address and Zip Code Scott Burr 7913 New Orleans Dr, Alexandria, VA 22308	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 06/28/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Owner Name and Address of Employer Tech Painting Company 1406B Leslie Ave, Alexandria, VA 22301		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 250.00
25. Full Name, Mailing Address and Zip Code Janice Adams 700 7th St SW Apt 506, Washington, DC 20024		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 06/29/2018 Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual		Occupation Owner Name and Address of Employer JMA Solutions 600 Maryland Ave SW Ste 400E, Washington, DC 20024		
		Aggregate Year-To-date		
				\$ 500.00
26. Full Name, Mailing Address and Zip Code Denise Wiktor 1725 Park Rd NW, Washington, DC 20010		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/05/2018 Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual		Occupation Attorney Name and Address of Employer Community Capital Corporation 514 V St NE, Washington, DC 20002		
		Aggregate Year-To-date		
				\$ 25.00
27. Full Name, Mailing Address and Zip Code Burnestine Taylor 105 Payne Rd, Montgomery, AL 36116		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/06/2018 Amount of Each Receipt This Period \$ 300.00
Contributor Type Individual		Occupation Physician Name and Address of Employer State of Alabama 215 Perry Hill Rd, Montgomery, AL 36109		
		Aggregate Year-To-date		
				\$ 550.00
28. Full Name, Mailing Address and Zip Code Walter Davis 9521 Greyson Ridge Dr, Charlotte, NC 28277		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/07/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Partner Name and Address of Employer Peachtree Providence Partners 2115 Rexford Rd Ste 34, Charlotte, NC 28211		
		Aggregate Year-To-date		
				\$ 50.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

29. Full Name, Mailing Address and Zip Code Kevin Parker 1101 30th St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer self 1101 30th St NW, Washington, DC 20007		
Aggregate Year-To-date			\$ 100.00
30. Full Name, Mailing Address and Zip Code Sabrina Dodd 3804 Inverness Dr, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/10/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3804 Inverness Dr, Chevy Chase, MD 20815		
Aggregate Year-To-date			\$ 100.00
31. Full Name, Mailing Address and Zip Code Rosalind Jeffries 3312 Shirley Ln, Chevy Chase, MD 20815	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/12/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 3312 Shirley Ln, Chevy Chase, MD 20815		
Aggregate Year-To-date			\$ 500.00
32. Full Name, Mailing Address and Zip Code Kimberley Alfonso 1809 Parkside Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/15/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Chief Operating Officer Name and Address of Employer Columbia Lighthouse for the Blind 8757 Georgia Ave Ste 805, Silver Spring, MD 20910		
Aggregate Year-To-date			\$ 100.00
33. Full Name, Mailing Address and Zip Code Deloris Pettis 16 Sun Valley Dr, Framingham, MA 01701	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Director Name and Address of Employer Boston college 140 Commonwealth ave, Chestnut Hill, MA 02467		
Aggregate Year-To-date			\$ 250.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

34. Full Name, Mailing Address and Zip Code Charles Powell 4642 Colonel Fenwick Pl, Upper Marlboro, MD 20772	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Sales Name and Address of Employer S Freedman & Sons 3322 Pennsy Dr, Landover, MD 20785		
Aggregate Year-To-date			\$ 1,000.00
35. Full Name, Mailing Address and Zip Code Karen Long 4111 Holly Tree Rd, Temple Hills, MD 20748	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Commissioner Name and Address of Employer Sports enhancement Po Box 1606, Temple Hills, MD 20757		
Aggregate Year-To-date			\$ 1,000.00
36. Full Name, Mailing Address and Zip Code Aaron Long 4111 Holly Tree Rd, Temple Hills, MD 20748	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation President Name and Address of Employer Sports Enhancement Po Box 1606, Temple Hills, MD 20757		
Aggregate Year-To-date			\$ 1,000.00
37. Full Name, Mailing Address and Zip Code Tony Dugger 1831 N Capitol St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Directorship Name and Address of Employer Government 2235 Shannon Pl SE, Washington, DC 20020		
Aggregate Year-To-date			\$ 500.00
38. Full Name, Mailing Address and Zip Code Michael Austin 226 Malcolm X Ave SE, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer United Medical Center 1310 Southern Ave SE, Washington, DC 20032		
Aggregate Year-To-date			\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

39. Full Name, Mailing Address and Zip Code Denise Isaac 3333 M St SE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Owner Name and Address of Employer D&D Properties 3333 M St SE, Washington, DC 20019		
Aggregate Year-To-date			\$ 200.00
40. Full Name, Mailing Address and Zip Code Greystone & Associates LLC 313 Quarry Ave, Capitol Heights, MD 20743	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Limited Liability Company			
Aggregate Year-To-date			\$ 1,000.00
41. Full Name, Mailing Address and Zip Code Independent Holding Corp 3215 Martin Luther King Jr Ave SE, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Corporation			
Aggregate Year-To-date			\$ 1,000.00
42. Full Name, Mailing Address and Zip Code KDT Healthy Options, LLC 5032 5th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Limited Liability Company			
Aggregate Year-To-date			\$ 1,000.00
43. Full Name, Mailing Address and Zip Code Community Economics 4111 Holly Tree Rd, Temple Hills, MD 20748	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Other-Economic			
Aggregate Year-To-date			\$ 1,000.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

44. Full Name, Mailing Address and Zip Code Andrew Wilson 15 46th PI NE, Washington, DC 20019	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Dir Clean Ser Name and Address of Employer Career Path DC 2100 Martin Luther King Jr Ave SE, Washington, DC 20020		
Aggregate Year-To-date			\$ 250.00
45. Full Name, Mailing Address and Zip Code Gloria Todd 2913 Denver St SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Education Name and Address of Employer Stratford University 7777 Leesburg Pike, Falls church, VA 22043		
Aggregate Year-To-date			\$ 100.00
46. Full Name, Mailing Address and Zip Code The May Firm LLC 3216 11th PI SE, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 1,000.00
47. Full Name, Mailing Address and Zip Code Ty'on Jones 1262 Talbert St SE Apt 7A, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/16/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Government Name and Address of Employer DDOT 55 M St SE # 700, Washington, DC 20003		
Aggregate Year-To-date			\$ 25.00
48. Full Name, Mailing Address and Zip Code Julie Dwyer 644 N Carolina Ave SE, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/17/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Chief of Staff Name and Address of Employer US Government 503 Pennsylvania Ave NW, Washington, DC 20001		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 250.00
49. Full Name, Mailing Address and Zip Code Kevin Parker 1101 30th St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/18/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer self 1101 30th St NW, Washington, DC 20007			
		Aggregate Year-To-date		\$ 200.00
50. Full Name, Mailing Address and Zip Code Cheryl Randall Thomas 1624 Van Buren St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/18/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation DC Government Employee Name and Address of Employer DOEE 1200 1st St NE, Washington, DC 20002			
		Aggregate Year-To-date		\$ 100.00
51. Full Name, Mailing Address and Zip Code Debbi Jarvis 10013 Ormond rd, Potomac, MD 20854	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/19/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Retired Name and Address of Employer Retired Pepco, Washington, DC 20068			
		Aggregate Year-To-date		\$ 200.00
52. Full Name, Mailing Address and Zip Code Stacie Scott 7317 Alaska Ave NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/19/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Realtor Name and Address of Employer Self 7317 Alaska Ave NW, Washington, DC 20012			
		Aggregate Year-To-date		\$ 50.00
53. Full Name, Mailing Address and Zip Code Deborah Wilder 911 Brick Manor Cir, Silver Spring, MD 20905	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/19/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Physician MD Name and Address of Employer United Medical Center 1328 Southern Ave SE, Washington, DC 20032			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 100.00
54. Full Name, Mailing Address and Zip Code Pamela Yancey-Reed 14208 Royal Forest Ln, Silver Spring, MD 20904		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/19/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Name and Address of Employer Self		
		Aggregate Year-To-date		\$ 100.00
55. Full Name, Mailing Address and Zip Code Peggy Lewis 2056 Derby Ridge Ln, Silver Spring, MD 20910		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/19/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation University Dean Name and Address of Employer Trinity Washington University 125 Michigan Ave NE, Washington, DC 20017		
		Aggregate Year-To-date		\$ 100.00
56. Full Name, Mailing Address and Zip Code Sandra Magwood 2117 Derby Ridge Ln, Silver Spring, MD 20910		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/19/2018 Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual		Occupation Name and Address of Employer Emerald Door 8311 Grubb Rd, Silver Spring, MD 20910		
		Aggregate Year-To-date		\$ 50.00
57. Full Name, Mailing Address and Zip Code Sheryl Washington 3159 Tennyson St NW, Washington, DC 20015		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/19/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Name and Address of Employer		
		Aggregate Year-To-date		\$ 100.00
58. Full Name, Mailing Address and Zip Code Debbie Galiber 1742 Holly St NW, Washington, DC 20012		Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/19/2018 Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual		Occupation Consultant Name and Address of Employer Self 1742 Holly St NW, Washington, DC 20012		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

	Aggregate Year-To-date			\$ 100.00
59. Full Name, Mailing Address and Zip Code Gabrielle Alfonso 1809 Parkside Dr NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/19/2018	Amount of Each Receipt This Period \$ 150.00	
Contributor Type Individual	Occupation Business Develop			
	Name and Address of Employer Dynamic Concepts Inc 1730 17th St NE, Washington, DC 20002			
	Aggregate Year-To-date			\$ 150.00
60. Full Name, Mailing Address and Zip Code Donna Shuler 5801 16th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/19/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Real Estate			
	Name and Address of Employer Answer Title 10 G St NE Ste 460, Washington, DC 20002			
	Aggregate Year-To-date			\$ 100.00
61. Full Name, Mailing Address and Zip Code diane pratt 1313 Vermont Ave NW Apt 17, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation consultant			
	Name and Address of Employer DP Consultants Inc 1313 Vermont Ave NW, Washington, DC 20005			
	Aggregate Year-To-date			\$ 200.00
62. Full Name, Mailing Address and Zip Code Andrea LaRue 6512 Ridge Dr, Bethesda, MD 20816	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Consultant			
	Name and Address of Employer NVG LLC 1640 Rhode Island Ave NW, Washington, DC 20036			
	Aggregate Year-To-date			\$ 500.00
63. Full Name, Mailing Address and Zip Code George Ellis 4115 1st St SE Apt 202, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 25.00	
Contributor Type Individual	Occupation Monitor			
	Name and Address of Employer Salvation Army			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 50.00
64. Full Name, Mailing Address and Zip Code Gerri Mason Hall 214 Oneida St NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation CHRO Name and Address of Employer Sodexo 9801 Washingtonian Blvd, Gaithersburg, MD 20878			
		Aggregate Year-To-date		\$ 500.00
65. Full Name, Mailing Address and Zip Code Gladys Mack 7030 Oregon Ave NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 200.00
66. Full Name, Mailing Address and Zip Code Janice Anderson 700 7th St SW Apt 514, Washington, DC 20024	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 50.00	
Contributor Type Individual	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 50.00
67. Full Name, Mailing Address and Zip Code Marilyn Brown 3060 Chestnut St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 100.00	
Contributor Type Individual	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 100.00
68. Full Name, Mailing Address and Zip Code Shari Curtis 6101 16th St NW Apt 913, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 200.00	
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 6101 16th St NW Apt 913, Washington, DC 20011			

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

		Aggregate Year-To-date		\$ 200.00
69. Full Name, Mailing Address and Zip Code Sheila Roberts 5206 Colorado Ave NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 250.00
	Contributor Type Individual			
	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 250.00
70. Full Name, Mailing Address and Zip Code Claudia McKoin 1610 Tamarack St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 75.00
	Contributor Type Individual			
	Occupation Name and Address of Employer			
		Aggregate Year-To-date		\$ 75.00
71. Full Name, Mailing Address and Zip Code F Alexis Roberson 6230 9th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/22/2018	Amount of Each Receipt This Period \$ 200.00
	Contributor Type Individual			
	Occupation President Name and Address of Employer OIC DC 3707 Martin Luther King Jr Ave SE, Washington, DC 20032			
		Aggregate Year-To-date		\$ 200.00
72. Full Name, Mailing Address and Zip Code Michael Allen 4801 Rainier Ave S, Seattle, WA 98118	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)		Date (month, day, year) 07/24/2018	Amount of Each Receipt This Period \$ 100.00
	Contributor Type Individual			
	Occupation Attorney Name and Address of Employer Nordstrom 1700 7th Ave, Seattle, WA 98101			
		Aggregate Year-To-date		\$ 100.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

73. Full Name, Mailing Address and Zip Code Kenneth Silverberg 8165 Ships Curve Ln, Springfield, VA 22153	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/24/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Nixon Peabody 799 9th St NW, Washington, DC 20001		
Aggregate Year-To-date			\$ 50.00
74. Full Name, Mailing Address and Zip Code Marcia Adams 46 Putnam Ave Apt 2, Brooklyn, NY 11238	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/25/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer NLRB 2 Metrotech Ctr Fl 5, Brooklyn, NY 11201		
Aggregate Year-To-date			\$ 50.00
75. Full Name, Mailing Address and Zip Code Eedy Nicholson 4600 Peek Trl Apt 219, Chesapeake, VA 23321	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/25/2018	Amount of Each Receipt This Period \$ 25.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 4600 Peek Trl Apt 219, Chesapeake, VA 23321		
Aggregate Year-To-date			\$ 25.00
76. Full Name, Mailing Address and Zip Code Johnny Taylor 610 Maryland Ave NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/26/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation CEO Name and Address of Employer Society for Human Resource Management 1800 Duke St, Alexandria, VA 22314		
Aggregate Year-To-date			\$ 100.00
77. Full Name, Mailing Address and Zip Code Philip Hampton 1439 Juniper St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 07/28/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Haynes and Boone LLP 800 17th St NW Ste 500, Washington, DC 20006		
Aggregate Year-To-date			\$ 200.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

78. Full Name, Mailing Address and Zip Code F Davis Camalier 550 S Ocean Blvd Apt 105D, Lantana, FL 33462	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/01/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Real Estate Developer Name and Address of Employer Washington Real Estate Partners 9804 S Military Trl Ste E11, Boynton Beach, FL 33436		
Aggregate Year-To-date			\$ 100.00
79. Full Name, Mailing Address and Zip Code Frederick Burks 1325 Angel Falls Ln SW, Atlanta, GA 30311	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/01/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation CEO Name and Address of Employer The Burks Companies Inc 191 Peachtree St NE Ste 800, Atlanta, GA 30303		
Aggregate Year-To-date			\$ 1,000.00
80. Full Name, Mailing Address and Zip Code Dwayne Toliver 810 Fern Pl NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/01/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer American Red Cross 431 18th St NW, Washington, DC 20006		
Aggregate Year-To-date			\$ 200.00
81. Full Name, Mailing Address and Zip Code Patricia Harrison 1220 Blair Mill Rd Apt 910, Silver Spring, MD 20910	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/01/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Business Develop Specialist Name and Address of Employer DC Gov 441 4th St NW Ste 850N, Washington, DC 20001		
Aggregate Year-To-date			\$ 100.00
82. Full Name, Mailing Address and Zip Code Douglas Keene 2033 1st St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/01/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Vice President Name and Address of Employer Management Sciences for Health 4301 Fairfax Dr, Arlington, VA 22203		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

	Aggregate Year-To-date		\$ 1,000.00
83. Full Name, Mailing Address and Zip Code Marla Diamond 6424 Old Chesterbrook Rd, McLean, VA 22101	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/02/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Not Employed Name and Address of Employer Not Employed 6424 Old Chesterbrook Rd, McLean, VA 22101		
	Aggregate Year-To-date		\$ 1,000.00
84. Full Name, Mailing Address and Zip Code Margaret Ann Cary 3622 Veazey St NW, Washington, DC 20008	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/02/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Physician Executive Name and Address of Employer Self 3622 Veazey St NW, Washington, DC 20008		
	Aggregate Year-To-date		\$ 100.00
85. Full Name, Mailing Address and Zip Code Phinis Jones 1845 Woodmont Pl SE, Washington, DC 20020	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/03/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Workforce Devel Name and Address of Employer Capitol Services Mgmt 3215 Martin Luther King Jr Ave SE, Washington, DC 20032		
	Aggregate Year-To-date		\$ 1,000.00
86. Full Name, Mailing Address and Zip Code Mary Cuthbert 629 Alabama Ave SE, Washington, DC 20032	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/03/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Office Manager Name and Address of Employer American Federation of Government Employees 80 F St NW, Washington, DC 20001		
	Aggregate Year-To-date		\$ 1,000.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

87. Full Name, Mailing Address and Zip Code Stephanie Thomas 2300 Rosecroft Ct, Oxon Hill, MD 20745	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/03/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Educator Name and Address of Employer Cedar Tree Academy 801 Howard Rd SE, Washington, DC 20020		
Aggregate Year-To-date		\$ 1,000.00	
88. Full Name, Mailing Address and Zip Code Alexis Foo 1345 S Capitol St SW Apt 116, Washington, DC 20003	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/03/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Gov Employee Name and Address of Employer Department of Def 8136 Old Keene Mill Rd, West Springfield, VA 22152		
Aggregate Year-To-date		\$ 1,000.00	
89. Full Name, Mailing Address and Zip Code John McCoy 1306 Holly St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/03/2018	Amount of Each Receipt This Period \$ 200.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 200.00	
90. Full Name, Mailing Address and Zip Code Roy Kaufmann 10116 Iron Gate Rd, Potomac, MD 20854-4728	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/05/2018	Amount of Each Receipt This Period \$ 150.00
Contributor Type Individual	Occupation Lawyer Name and Address of Employer Self 1120 20th St NW, Washington, DC 20036		
Aggregate Year-To-date		\$ 150.00	
91. Full Name, Mailing Address and Zip Code Manatt Phelps and Phillips LLC 11355 W Olympic Blvd, Los Angeles, CA 90064	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/06/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

	Aggregate Year-To-date		\$ 1,000.00
92. Full Name, Mailing Address and Zip Code Shaundrae Williams 6007 McLean PI NE, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/06/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Solution Consultant Name and Address of Employer DXC Technology 13600 Eds Dr, Herndon, VA 20171		
	Aggregate Year-To-date		\$ 250.00
93. Full Name, Mailing Address and Zip Code Paramount Development 3407 14th St NW, Washington, DC 20010	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/07/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Limited Liability Company			
	Aggregate Year-To-date		\$ 1,000.00
94. Full Name, Mailing Address and Zip Code Anchor Construction Corporation 2254 25th PI NE, Washington, DC 20018	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/07/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business	Occupation Name and Address of Employer		
Business Type Corporation			
	Aggregate Year-To-date		\$ 1,000.00
95. Full Name, Mailing Address and Zip Code Miriam Linder 1525 33rd St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Name and Address of Employer		
	Aggregate Year-To-date		\$ 1,000.00
96. Full Name, Mailing Address and Zip Code Russell Linder 1025 Thomas Jefferson St NW Ste 502E, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Name and Address of Employer		

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

	Aggregate Year-To-date			\$ 1,000.00
97. Full Name, Mailing Address and Zip Code Kevin Byrd 4837 Sangamore Rd, Bethesda, MD 20816	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Name and Address of Employer			
	Aggregate Year-To-date			\$ 500.00
98. Full Name, Mailing Address and Zip Code Washington Boat Lines Inc 1050 Thomas Jefferson St NW Ste 100, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 1,000.00	
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer			
	Aggregate Year-To-date			\$ 1,000.00
99. Full Name, Mailing Address and Zip Code Casey Stringer 1821 Sudbury Ln NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 250.00	
Contributor Type Individual	Occupation Managing Member Name and Address of Employer Broughton Construction 4832 Nannie Helen Burroughs Ave NE, Washington, DC 20019			
	Aggregate Year-To-date			\$ 250.00
100. Full Name, Mailing Address and Zip Code Franklin Wilds 5016 Eastern Ave NE, Washington, DC 20017	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 500.00	
Contributor Type Individual	Occupation Name and Address of Employer			
	Aggregate Year-To-date			\$ 500.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

101. Full Name, Mailing Address and Zip Code anthony washington 4502 17th St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Banker Name and Address of Employer EagleBank 7830 Old Georgetown Rd, Bethesda, MD 20814		
Aggregate Year-To-date		\$ 250.00	
102. Full Name, Mailing Address and Zip Code Morgan Ventures 1734 Allison St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/08/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Entrepreneur Name and Address of Employer Self 1734 Allison St NW, Washington, DC 20011		
Aggregate Year-To-date		\$ 100.00	
103. Full Name, Mailing Address and Zip Code Jones Linder 1526 33rd St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 1,000.00	
104. Full Name, Mailing Address and Zip Code The Rich Firm PC 1250 I St NW Ste 902, Washington, DC 20005	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 250.00	
105. Full Name, Mailing Address and Zip Code Dynamic Concepts Inc 1730 17th St NE, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 1,000.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date		\$ 1,000.00	

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

106. Full Name, Mailing Address and Zip Code Charles Gaither 1422 Van Buren St NW, Washington, DC 20012	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input checked="" type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer Self 1422 Van Buren St NW, Washington, DC 20012		
Aggregate Year-To-date			\$ 200.00
107. Full Name, Mailing Address and Zip Code U Street Parking Inc 50 Rhode Island Ave NE Ste 100, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Business Business Type Corporation	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 500.00
108. Full Name, Mailing Address and Zip Code Jaquenette Cooke Dean 6101 16th St NW Apt 508, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 100.00
Contributor Type Individual	Occupation Sales Name and Address of Employer ADP 401 N Washington St, Rockville, MD 20850		
Aggregate Year-To-date			\$ 100.00
109. Full Name, Mailing Address and Zip Code J L Terrell Construction LLC 820 H St NE Ste 101, Washington, DC 20002	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 150.00
Contributor Type Business Business Type Limited Liability Company	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 150.00
110. Full Name, Mailing Address and Zip Code Thomas Graham 14303 Ansonia Ct, Upper Marlboro, MD 20774	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 250.00
Contributor Type Individual	Occupation Name and Address of Employer		
Aggregate Year-To-date			\$ 250.00

ITEMIZED RECEIPTS FROM INDIVIDUALS/ORGANIZATIONS OTHER THAN COMMITTEES

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Full Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

111. Full Name, Mailing Address and Zip Code Kevin Parker 1101 30th St NW, Washington, DC 20007	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 50.00
Contributor Type Individual	Occupation Consultant Name and Address of Employer self 1101 30th St NW, Washington, DC 20007		
Aggregate Year-To-date		\$ 250.00	
112. Full Name, Mailing Address and Zip Code David Rivers 220 3rd Ave Unit 2B, Charleston, SC 29403	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 950.00
Contributor Type Individual	Occupation Administrator Name and Address of Employer MUSC 171 Ashley Avenue, Charleston, SC 29425		
Aggregate Year-To-date		\$ 1,000.00	
113. Full Name, Mailing Address and Zip Code Roger Clark 1415 Montague St NW, Washington, DC 20011	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/09/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Attorney Name and Address of Employer Squire Patton Boggs 2550 M Street NW, Washington, DC 20037		
Aggregate Year-To-date		\$ 750.00	
114. Full Name, Mailing Address and Zip Code Greg Rooney 6136 32nd St NW, Washington, DC 20015	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/10/2018	Amount of Each Receipt This Period \$ 500.00
Contributor Type Individual	Occupation Real Estate Name and Address of Employer Integrated Development Services 6136 32nd St NW, Washington, DC 20015		
Aggregate Year-To-date		\$ 500.00	
115. Full Name, Mailing Address and Zip Code Kerry Pearson 750 3rd St NW, Washington, DC 20001	Contribution Type <input type="checkbox"/> Cash <input type="checkbox"/> Money Order <input type="checkbox"/> Check <input type="checkbox"/> Cashier Check <input checked="" type="checkbox"/> Credit Card <input type="checkbox"/> Other (Specify) <input type="checkbox"/> In Kind (Specify)	Date (month, day, year) 08/10/2018	Amount of Each Receipt This Period \$ 225.00
Contributor Type Individual	Occupation Business Development Name and Address of Employer Self 750 3rd St NW, Washington, DC 20001		
Aggregate Year-To-date		\$ 225.00	

TOTAL This Period (Aggregate of all Receipt pages)	\$ 50,875.00
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FULL Name of Committee (Name of Candidate, if Candidate is reporting)

Allen for DC

1. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/11/2018	Amount of Each Expenditure This Period \$ 110.63
Occupation	Name and Address of Employer		
2. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/11/2018	Amount of Each Expenditure This Period \$ 81.42
Occupation	Name and Address of Employer		
3. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/15/2018	Amount of Each Expenditure This Period \$ 989.82
Occupation	Name and Address of Employer		
4. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 06/25/2018	Amount of Each Expenditure This Period \$ 465.14
Occupation	Name and Address of Employer		
5. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/02/2018	Amount of Each Expenditure This Period \$ 1.98
Occupation	Name and Address of Employer		
6. Full Name, Mailing Address and Zip Code Gladsvl 117 Carroll St NW, Washington, DC 20012	Purpose of Expenditure Rental	Date (month, day, year) 07/03/2018	Amount of Each Expenditure This Period \$ 1,000.00
Occupation	Name and Address of Employer		
7. Full Name, Mailing Address and Zip Code Kevin Parker 1884 Columbia Rd NW, Washington, DC 20009	Purpose of Expenditure Campaign Materials	Date (month, day, year) 07/03/2018	Amount of Each Expenditure This Period \$ 470.00
Occupation Consultant	Name and Address of Employer Self 1884 Columbia Rd NW, Washington, DC 20009		

8. Full Name, Mailing Address and Zip Code Robert Green 2903 Georgia Avenue NW, Washington, DC 20001	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 07/03/2018	Amount of Each Expenditure This Period \$ 1,330.00
Occupation Consultant	Name and Address of Employer Self 2903 Georgia Avenue NW, Washington, DC 20001		
9. Full Name, Mailing Address and Zip Code Aaron Holmes 1527 17th St SE, Washington, DC 20020	Purpose of Expenditure Consultant	Date (month, day, year) 07/05/2018	Amount of Each Expenditure This Period \$ 3,550.00
Occupation Consultant	Name and Address of Employer Self 1527 17th St SE, Washington, DC 20020		
10. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/05/2018	Amount of Each Expenditure This Period \$ 84.93
Occupation	Name and Address of Employer		
11. Full Name, Mailing Address and Zip Code Paul Trantham 2345 Skyland Place SE #826, Washington, DC 20030	Purpose of Expenditure Consultant	Date (month, day, year) 07/09/2018	Amount of Each Expenditure This Period \$ 250.00
Occupation Consultant	Name and Address of Employer Self 2345 Skyland Place SE #826, Washington, DC 20030		
12. Full Name, Mailing Address and Zip Code Print Depot 7941 Central Ave, Capitol Heights, MD 20743	Purpose of Expenditure Printing	Date (month, day, year) 07/09/2018	Amount of Each Expenditure This Period \$ 636.00
Occupation	Name and Address of Employer		
13. Full Name, Mailing Address and Zip Code Gabrielle Thomas 14119 Rocking M Ln, Greencastle, PA 17225	Purpose of Expenditure Campaign Materials	Date (month, day, year) 07/10/2018	Amount of Each Expenditure This Period \$ 700.00
Occupation Photographer	Name and Address of Employer Self 14119 Rocking M Ln, Greencastle, PA 17225		
14. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/12/2018	Amount of Each Expenditure This Period \$ 29.63
Occupation	Name and Address of Employer		
15. Full Name, Mailing Address and Zip Code PMI 1425 NEW YORK AVE NW, Washington, DC 20005	Purpose of Expenditure Travel	Date (month, day, year) 07/13/2018	Amount of Each Expenditure This Period \$ 11.00
Occupation	Name and Address of Employer		

16. Full Name, Mailing Address and Zip Code KDT Healthy Options LLC 5032 5th Street NW, Washington, DC 20011	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/18/2018	Amount of Each Expenditure This Period \$ 300.00
Occupation	Name and Address of Employer		
17. Full Name, Mailing Address and Zip Code CVS 110 Carrol Ave NW, Washington, DC 20012	Purpose of Expenditure Supplies	Date (month, day, year) 07/20/2018	Amount of Each Expenditure This Period \$ 5.37
Occupation	Name and Address of Employer		
18. Full Name, Mailing Address and Zip Code Gagne Associates CPAs PLLC 641 S St NW, Washington, DC 20001	Purpose of Expenditure Consultant	Date (month, day, year) 07/20/2018	Amount of Each Expenditure This Period \$ 250.00
Occupation	Name and Address of Employer		
19. Full Name, Mailing Address and Zip Code Gagne Associates CPAs PLLC 641 S St NW, Washington, DC 20001	Purpose of Expenditure Consultant	Date (month, day, year) 07/20/2018	Amount of Each Expenditure This Period \$ 325.00
Occupation	Name and Address of Employer		
20. Full Name, Mailing Address and Zip Code Robert Green 2904 Georgia Avenue NW, Washington, DC 20001	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 07/20/2018	Amount of Each Expenditure This Period \$ 6,589.00
Occupation Consultant	Name and Address of Employer Self 2903 Georgia Avenue NW, Washington, DC 20001		
21. Full Name, Mailing Address and Zip Code Safeway 6500 Piney Branch Road NW, Washington, DC 20012	Purpose of Expenditure Supplies	Date (month, day, year) 07/20/2018	Amount of Each Expenditure This Period \$ 50.83
Occupation	Name and Address of Employer		
22. Full Name, Mailing Address and Zip Code Gerri Adams Simmons 6409 13th St NW, Washington, DC 20012	Purpose of Expenditure Catering/Refreshments	Date (month, day, year) 07/24/2018	Amount of Each Expenditure This Period \$ 700.00
Occupation Consultant	Name and Address of Employer Self 6409 13th St NW, Washington, DC 20012		
23. Full Name, Mailing Address and Zip Code Political Data Inc. PO Box 59570, Norwalk, CA 90652	Purpose of Expenditure Consultant	Date (month, day, year) 07/24/2018	Amount of Each Expenditure This Period \$ 1,925.00
Occupation	Name and Address of Employer		

24. Full Name, Mailing Address and Zip Code Glenn Fry Art 1514 Buchanan St NW, Washington, DC 20011	Purpose of Expenditure Campaign Materials	Date (month, day, year) 07/24/2018	Amount of Each Expenditure This Period \$ 230.00
Occupation	Name and Address of Employer		
25. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/25/2018	Amount of Each Expenditure This Period \$ 29.63
Occupation	Name and Address of Employer		
26. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/25/2018	Amount of Each Expenditure This Period \$ 12.84
Occupation	Name and Address of Employer		
27. Full Name, Mailing Address and Zip Code Takoma Masonic Ctr 115 Carroll St NW, Washington, DC 20012	Purpose of Expenditure Rental	Date (month, day, year) 07/26/2018	Amount of Each Expenditure This Period \$ 1,000.00
Occupation	Name and Address of Employer		
28. Full Name, Mailing Address and Zip Code Industrial Bank 1100 U St NW, Washington, DC 20009	Purpose of Expenditure Bank Fees	Date (month, day, year) 07/27/2018	Amount of Each Expenditure This Period \$ 14.00
Occupation	Name and Address of Employer		
29. Full Name, Mailing Address and Zip Code USPS 6909 Laurel Ave, Takoma Park, MD 20012	Purpose of Expenditure Postage	Date (month, day, year) 07/29/2018	Amount of Each Expenditure This Period \$ 10.00
Occupation	Name and Address of Employer		
30. Full Name, Mailing Address and Zip Code MitchRich 1440 G Street NW, Washington, DC 20005	Purpose of Expenditure Consultant	Date (month, day, year) 07/30/2018	Amount of Each Expenditure This Period \$ 2,500.00
Occupation	Name and Address of Employer		
31. Full Name, Mailing Address and Zip Code Amazon PO Box 81226, Seattle, WA 98108	Purpose of Expenditure Supplies	Date (month, day, year) 08/01/2018	Amount of Each Expenditure This Period \$ 71.58
Occupation	Name and Address of Employer		

32. Full Name, Mailing Address and Zip Code Robert Green 2905 Georgia Avenue NW, Washington, DC 20001	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 08/01/2018	Amount of Each Expenditure This Period \$ 315.00
Occupation Consultant	Name and Address of Employer Self 2903 Georgia Avenue NW, Washington, DC 20001		
33. Full Name, Mailing Address and Zip Code Robert Green 2906 Georgia Avenue NW, Washington, DC 20001	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 08/01/2018	Amount of Each Expenditure This Period \$ 7,495.00
Occupation Consultant	Name and Address of Employer Self 2903 Georgia Avenue NW, Washington, DC 20001		
34. Full Name, Mailing Address and Zip Code Shell 6419 Georgia Avenue NW, Washington, DC 20012	Purpose of Expenditure Travel	Date (month, day, year) 08/01/2018	Amount of Each Expenditure This Period \$ 46.00
Occupation	Name and Address of Employer		
35. Full Name, Mailing Address and Zip Code ActBlue PO Box 441146, Somerville, MA 02144	Purpose of Expenditure Bank Fees	Date (month, day, year) 08/02/2018	Amount of Each Expenditure This Period \$ 90.85
Occupation	Name and Address of Employer		
36. Full Name, Mailing Address and Zip Code CVS 111 Carrol Ave NW, Washington, DC 20013	Purpose of Expenditure Supplies	Date (month, day, year) 08/02/2018	Amount of Each Expenditure This Period \$ 21.64
Occupation	Name and Address of Employer		
37. Full Name, Mailing Address and Zip Code Jaylen Black 1000 Lakeside Dr 326 C, Athens, GA 30605	Purpose of Expenditure Polling/Mailing List	Date (month, day, year) 08/02/2018	Amount of Each Expenditure This Period \$ 425.00
Occupation Consultant	Name and Address of Employer Self 1000 Lakeside Dr 326 C, Athens, GA 30605		
38. Full Name, Mailing Address and Zip Code Walmart 5929 Georgia Avenue NW, Washington, DC 20011	Purpose of Expenditure Supplies	Date (month, day, year) 08/06/2018	Amount of Each Expenditure This Period \$ 330.94
Occupation	Name and Address of Employer		
39. Full Name, Mailing Address and Zip Code Community Printing Service 6979 Maple St NW, Washington, DC 20012	Purpose of Expenditure Printing	Date (month, day, year) 08/08/2018	Amount of Each Expenditure This Period \$ 63.45
Occupation	Name and Address of Employer		

40. Full Name, Mailing Address and Zip Code Imprenta Corp 5823 Colorado Ave NW, Washington, DC 20011	Purpose of Expenditure Printing	Date (month, day, year) 08/09/2018	Amount of Each Expenditure This Period \$ 595.00
Occupation	Name and Address of Employer		
TOTAL This Period (Aggregate of all expenditure pages)			\$ 33,106.68